

Singlife CareShield Standard and Plus Declaration Document



1. I understand that the insurance shall not take effect until:
 - (a) it has been accepted by Singapore Life Ltd ("Singlife");
 - (b) Singlife has received the full premium; and
 - (c) I am covered under ElderShield/CareShield Life.

2. If I decide to switch from/replace my existing policy, I understand that:
 - (a) I may incur transaction costs without gaining any real benefit from the switch/replacement.
 - (b) I may incur penalties for terminating the existing policies.
 - (c) I may not be insurable at standard terms.
 - (d) The switch/replacement policy may offer a lower level of benefit at a higher cost or same cost or offer the same level of benefit at a higher cost.
 - (e) The switch/replacement policy may be less suitable, and the terms and conditions may differ.
 - (f) There may be other options available besides switching/replacing the policy.

3. I declare that I have chosen to buy this product without advice from a financial adviser representative and confirm that I have received a copy of the following documents:
 - Policy contract
 - Product SummaryAnd I have fully read and understood their content. I take sole responsibility to ensure that the product is appropriate for my financial needs and insurance objectives.

4. I am aware that I can view and download a copy of "Your Guide to Life Insurance", "Your Guide to Health Insurance", Infographic "Evaluating My Health Insurance coverage", and Infographic "Moratorium on Genetic Testing and Insurance" from singlife.com.

5. I am aware that if I decide that the policy is not suitable after my purchase, I may terminate the policy, according to the Free-Look terms noted in the Product Summary.

6. I declare that all information in this Application Form is true and complete and I have not withheld any fact that is likely to influence the assessment and acceptance of this application. I will inform Singlife of any change in the state of my health or activities between the date of this application and the date on which cover under the policy applied for starts. I understand that:
 - (a) any misrepresentation or concealment of facts shall render the policy to be issued and any other policy which I have with Singlife to which the information applies null and void; and
 - (b) if any information disclosed to Singlife (whether on this Application form or otherwise) is inconsistent with another application form or otherwise, I shall answer all questions and provide all documents which Singlife may require to clarify the inconsistencies; and if a Pre-Existing Condition is found, Singlife may, in its absolute discretion, impose conditions (including but not limited to permanent exclusion of the Pre-Existing Condition), void or terminate any policy issued by Singlife to which the information applies or reject my application.

7. I understand that I may be asked to go for a full medical assessment and/or provide more information to help Singlife assess my application.

8. I agree that all medical examination reports done for the purpose of this application are properties of Singlife to be used solely for insurance purposes.

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9. I am aware that the policy I am applying for is authorised for sale in Singapore and acknowledge that I am responsible for ensuring that the laws and regulations applicable to my nationality and country of residence allows me to buy the policy. I understand that Singlife will not be responsible for any legal consequences or tax implications that may arise in connection with buying this policy.
10. I further declare that:
- (a) I am not an undischarged bankrupt, and I have committed no act of bankruptcy nor had a receiving order or adjudication order made against me in the last 12 months.
 - (b) I have not been convicted of any criminal offence, been the subject of any potential or pending criminal investigations or proceedings, nor been notified of or had any investigations which may lead to criminal proceedings or convictions in any jurisdiction.
11. I authorise any medical source, insurance office or organisation to release to Singlife and similarly Singlife to release to any of the above organisations, relevant information concerning me at any time, regardless of whether this application is accepted by Singlife. A photographic copy of this authorisation shall be deemed as valid as the original.
12. I understand and agree that:
- (a) Singlife will not process or accept my application if I or a person connected with this application or the policy to be issued is found to be a Prohibited Person*. Singlife's decision is final.
*A Prohibited Person means a person (including any director or direct/indirect shareholder or person having executive authority or natural persons appointed to act on my/our behalf beneficiaries, or my/our beneficial owners or beneficiaries' beneficial owners) who is subject to any law, regulation or sanction in any country that has the effect of prohibiting Singlife from insuring, doing business with or otherwise offering any economic benefit to such person.
 - (b) If Singlife becomes aware at any time that a person connected with the policy to be issued has become a Prohibited Person, Singlife may in its absolute discretion cease processing the application or void the policy from inception or block and/or terminate the application, and no benefits shall be payable.
 - (c) As an ongoing obligation, I undertake to immediately inform Singlife of any change in identity, status, residency and identification documents of any person connected with this application.
 - (d) A "Person" includes an entity.
13. I consent to Singlife (and Singlife related group of companies) to:
- (a) collecting, using and/or disclosing my personal data (whether contained in this form or obtained from other sources; existing data in Singlife's record or to be collected in future) for the following purposes:
 - to issue and administer my existing and/or new policy(ies) and/or account(s) with Singlife and such other purposes ancillary or related to the administering of the policy(ies) and/or account(s), including the processing of my personal data for underwriting purposes, payment of premiums (including, where applicable, the deduction of premiums due from the MediSave accounts of the proposed Lives Assured) and/or claims purposes;
 - for statistical, research, compliance, audit and regulatory purposes; and
 - to provide general information on product enhancements and services relevant to my needs or policies (including increasing benefits, adding riders/supplements and/or Lives Assured) as well as to provide financial advice or product recommendations to me, where applicable.

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13. (b) disclosing and transferring my personal data to (i) Singlife related group of companies and their respective third party service providers, reinsurers, suppliers and intermediaries; (ii) the Government of Singapore (iii) statutory boards; and (iv) organisations approved by the Government of Singapore, whether located in Singapore or elsewhere, for the above purposes and such other purposes as described in Singlife's Personal Data Protection Statement ("Statement")

For a copy of Statement and more information on Singlife's data protection policy and full details of the purpose of collection and use and disclosure of your personal data, please visit singlife.com/pdpa.

14. I understand that I will receive my policy, any endorsements and communications electronically after my insurance application is approved and policy is issued. The mobile number and email address provided will be used to inform me when e-documents are ready for viewing online at singlife.com/mydocuments. If e-documents are not available, I will receive printed documents. This will apply to all my individual life and health policies with Singlife. I understand that I may log on to MySinglife to opt for my preferred document option and may switch between e-documents and printed documents.
15. I agree that:
- (a) all e-documents are deemed to have been received by me upon my receipt of the SMS and/or email informing that it is accessible on MySinglife. The SMS or email will be sent to my last known mobile number and/or email address notified to Singlife.
 - (b) my policy, any endorsements or communications sent by post is deemed to have been received by me 7 days from the date of posting to the last known address notified to Singlife.
16. I represent, warrant and undertake that:
- (a) I will notify Singlife immediately of any change to my mobile number, address and/or email address; and
 - (b) I will indemnify Singlife for any losses, damages or other consequences arising from or in connection with any incomplete or incorrect mobile number, address and/or email address.